Name in Full: Eliza Cofer

Certificate of Death

Died at Town: Waldorf County: Charles MARYLAND

Date 1899 Month: Dec Day: 29 Age Y. 58 M. D. Native of: Chas County Occupation: House Wife

~~Male~~ ~~White~~ Married ~~Widow~~ ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living 7

~~Husband~~ Wife of Robert Cofer

Father's Name

Mother's Name

Cause of Death: Primary

Immediate Paralysis

How long sick: Hdrye

~~Accident, Suicide, Homicide~~

Reported by G. O. Monroe MD

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 6[illegible]

Name in Full: Mary Hatcher

Certificate of Death

Died at Town: Bronkey County: Charles MARYLAND

Date 1898 Month: Dec Day: 9 | Age Y. M. D.: 65-1 | Native of: Charles Co. | Occupation: Cook

~~Male~~ ~~White~~ Married Widow ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ ~~Number of children living~~ number children four

~~Husband~~ Wife of Henry Hatcher

Father's Name: Mathew Chapman Mother's Name: Kitty Chapman

Cause of Death: Primary: Consumption (Pulmonary) How long sick

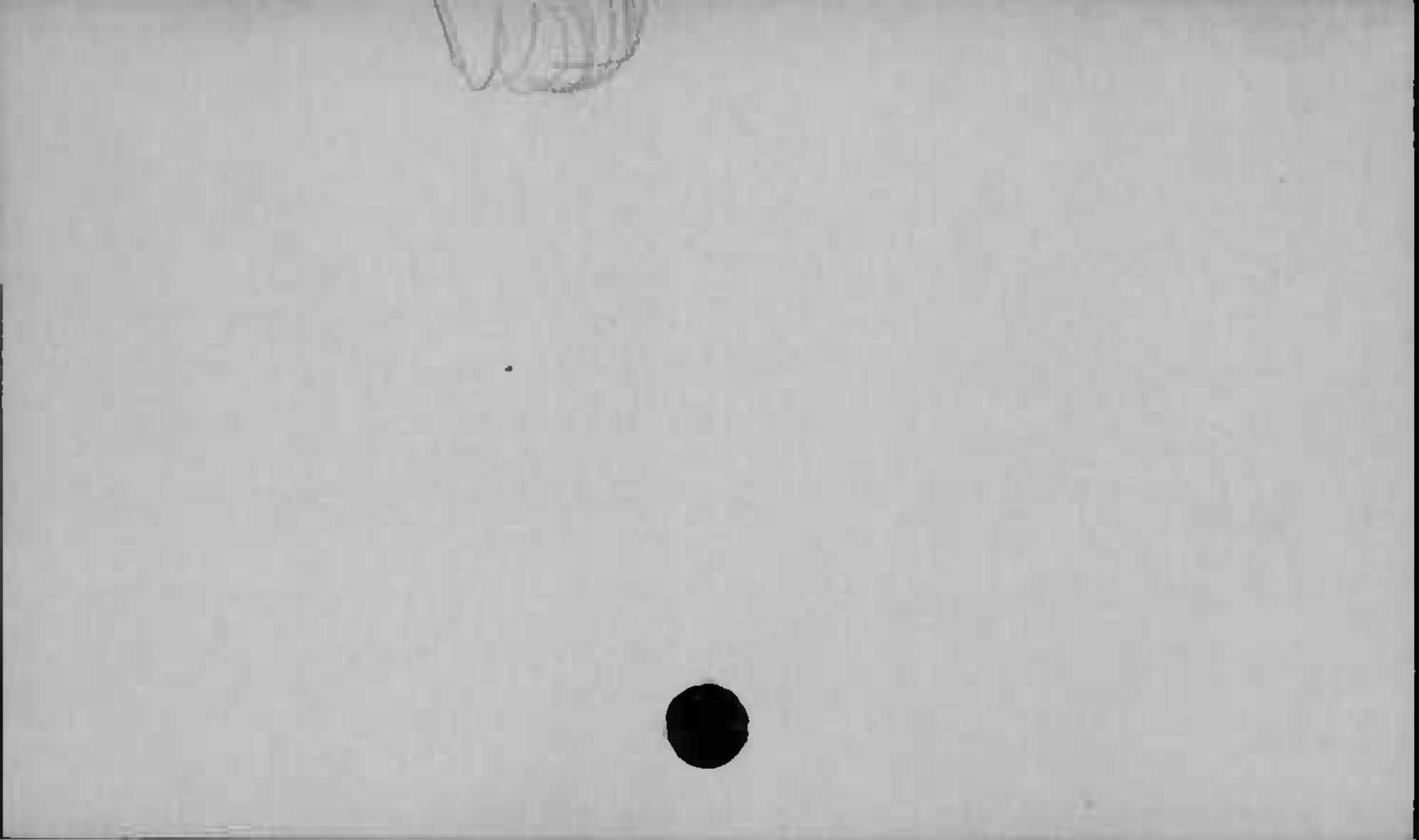
Immediate: Pneumonia ~~Accident, Suicide, Homicide~~

Reported by: Dr. R. K. Compton

Address: Bronkey, Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Name in Full

Certificate of Death

Frances Edelen

Died at St Thomas. (Town) Charles (County) MARYLAND

Date 1898 Month Oct. Day 22nd | Age Y. 20. M. 9. D. | Native of | Occupation

~~Male~~ Female ~~White~~ Colored Married ~~Single~~ Widow ~~Widower~~ Divorced

Number of children living one

~~Husband~~ Wife of Joseph Edelen

Father's Name Frank Dyson

Mother's Name Victorine Minor

Cause of Death: Primary — Consumption — How long sick 2 Years

Immediate

~~Accident, Suicide, Homicide~~

Reported by Peter W. Roby Undertaker

Address Bel Alton Charles County

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full

Certificate of Death

Not named Hawkins

Town

Newport

County

Charles

Died at

MARYLAND

Month Day

Y. M. D.

Native of

Occupation

Date 189 8 Dec 2

Age

Md

nurse

Male ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ Colored ~~Single~~ Widower Number ~~of children~~ living

Husband of Wife

Father's Name Jno A Hawkins

Mother's Name Catherine Hawkins

Cause of Death: Primary Still born

How long sick

Immediate

~~Accident, Suicide, Homicide~~

Reported by Caldus H Posey

Address Faulkner Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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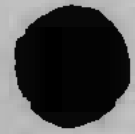

Name in Full

Certificate of Death

Benj M. Langley

Died at Town Pomonkey County Charles MARYLAND

Date 189 8 Month Dec. Day 1 Age Y. 47 M. 7 D. Native of Charles Occupation Farmer

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 3

Husband Wife of Martha Ann Thompson

Father's Name Henry Langley Mother's Name Sarah Waters

Cause of Death Primary Appendicitis How long sick 2 days

Immediate ~~Accident, Suicide, Homicide~~

Reported by J. W. Mitchell M. D.

Address Pomonkey Charles Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full | Certificate of Death

Noel James McIntyre

~~Town~~ County

Died at Mason Springs - Charles MARYLAND

Date 1898 Month Dec. Day 7 | Age Y. 43 M. D. | Native of Scotland | Occupation Farmer

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~ none

~~Husband~~ ~~of~~ ~~Wife~~

Father's Name Not Known

Mother's Name Not Known

Cause of Death: Primary Phthisis (Consumption) | How long sick

Immediate Congestion of Lungs | ~~Accident, Suicide, Homicide~~

Reported by Dr. R. K. Compton

Address Pomonkey Md —

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full

Mrs Wm Murphy

Certificate of Death

Died at Town Nanjemoy County Chas MARYLAND

Date 1898 Month Dec Day 8 Age Y. 50 M. D. Native of Md Occupation Housewife

~~Male~~ White Married ~~Widow~~ Divorced

Female ~~Colored~~ ~~Single~~ Widower Number of children living 5

~~Husband~~ ~~of~~ Wife Wm Murphy

Father's Name Long Mother's Name —

Cause of Death Primary Blu Pneumonia with Erysipelas How long sick 10 days

Immediate ~~Accident, Suicide, Homicide~~

Reported by S H Speake

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full

Certificate of Death

Nancy Smallwood

Died at ~~Wet Air~~ Town Bellton County Charles MARYLAND

Date 1898 Month Day Date 20 | Age Y. M. D. 102 | Native of Charles Co. | Occupation

~~Male~~ ~~White~~ ~~Married~~ Widow ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living 6

~~Husband~~ Wife of Vincent Smallwood

Father's Name Anthony Milburn

Mother's Name not Known

Cause of Death: Primary old age

Immediate Hart failure

How long sick 8 days

Accident, Suicide, Homicide

Reported by Peter W. Roby Undertaker

Address Bel alton M.d.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full

Certificate of Death

Jon Spaulding

Died at Town Hill Wp Dist. County Chas

MARYLAND

Date 189 8 Month Dec Day 14 Age Y. 69 M. D. Native of Md Occupation Laborer

Male ~~White~~ Married ~~Widow~~ ~~Divorced~~

~~Female~~ Colored ~~Single~~ ~~Widower~~ Number of children living

Husband ~~Wife~~ of Cath. Spaulding

Father's Name Spaulding Mother's Name

Cause of Death Primary Paralysis How long sick

Immediate Accident, Suicide, Homicide

Reported by S. H. Speake

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full Joseph I Sympson. Certificate of Death

Died at Town Falkner County Charles MARYLAND

Date 1898 Month 12 Day 17 Age Y. 70 M. — D. — Native of Charles Co Md Occupation Farmer

Male White Married ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 5

Husband of Wife Fannie L Sympson

Father's Name — Mother's Name —

Cause of Death Primary Pneumonia How long sick 7 days

Immediate Cardiac Insufficiency ~~Accident, Suicide, Homicide~~

Reported by Spencer Md

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full

Certificate of Death

John Landcaster Thomas.

Died at Town Pomonkey County Charles MARYLAND

Date 1898 Month Dec. Day 31 Age Y. - M. 5 D. - Native of Chas. Occupation ——

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living

Husband / Wife of ——

Father's Name H. Marshall Thomas Mother's Name Sallie V. Tubman

Cause of Death: Primary Bronchio-Pneumonia. How long sick 6 days.

Immediate

~~Accident, Suicide~~, Homicide

Reported by J. W. Mitchell M. D.

Address Pomonkey Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65258

Name in Full: Mary Tinker

Certificate of Death

Died at — Town: Bel Alton — County: Charles — MARYLAND

Date 1898 — Month: 12 — Day: 21 — Age: Y. 63 M. — D. — Native of: Charles Co — Occupation: Midwife

~~Male~~ ~~White~~ ~~Married~~ Widow ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living: 3

~~Husband~~ Wife of: Isac Tinker

Father's Name: John Colbert — Mother's Name: Lybria Colbert

Cause of Death — Primary: La Griffe — How long sick: 2 months

Immediate: Heart Failure — ~~Accident, Suicide, Homicide~~

Reported by: Charles W. Roby J.P. + E. Spencer M.D.

Address: Bel Alton

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Maria Wallace

Died at Town: Bel Alton County: Charles MARYLAND

Date 1898 Month: Dec Day: 30th Age Y. M. D.: 98. Native of: Charles Co. Occupation

~~Male~~ ~~White~~ ~~Married~~ Widow ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living 2

~~Husband~~ Wife of Frank Wallace

Father's Name: Bdrid Gant Mother's Name: Elizabeth Gant

Cause of Death: Primary: Old age — How long sick: 3 months

Immediate: Heart failure — ~~Accident, Suicide, Homicide~~

Reported by: Peter W Roby Undertaker

Address: Bel Alton

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

John. Benjamin Welch

Died at Town Near McConchie County Charles MARYLAND

Date 1898 Month Dec Day 4 Age Y. M. D. Native of Chas Co. Md Occupation

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of

Wife

Father's Name Benjamin Welch Mother's Name Mary Miller

Cause of Death Primary Diptheria 8 a How long sick Eight days

Immediate Exhaustion Accident, Suicide, Homicide

Reported by John. T. Diggs MD

Address Port Tobacco Chas Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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